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ON THE VALUE OF THE OPERATION OF EXTRACTION OF CATARACT, AND ON THE USE OF ANÆSTHETIC AGENTS IN OPHTHALMIC SURGERY.

BY HENRY W. WILLIAMS, M.D., BOSTON.

*To the Editor of the Boston Medical and Surgical Journal.*

SIR.—Whilst we endeavor, by careful observation and reflection, to contribute our share towards increasing the efficiency of the art of healing, it is no less important to maintain undiminished the resources with which it has been enriched by the labors of our predecessors.

This consideration prompts me to ask the opportunity of recalling the attention of the profession, through the pages of your Journal, to an operation, which seems to have been appreciated among us (at least in New England) below its real value, and to have fallen, in some measure, into neglect and disuse.

I refer to the operation for the extraction of cataract, and particularly to that method of performing it which is effected through a section of the upper half of the cornea.

One of the reasons which have contributed to cause the operation to be regarded with disfavor, was the mistaken zeal which led some of its earlier partisans to perform it, indiscriminately, in all cases of cataract.

As we meet with several varieties of this affection, essentially differing in their physical characters, we may readily infer that a mode of operation which is best adapted for one form may be very inapplicable to another.

A large number of cases, comprising the very soft and the fluid cataracts, are best disposed of by the process of division. It is only between the methods of displacement or couching, and by extraction, that comparison is to be made.

If the last-named operation is successful, it accomplishes a radical cure. We no longer have a foreign body in the eye, liable by its hard consistence or its increased volume to cause inflammation, or by its reascension to create a necessity for a second operation. Extraction has also claims to superiority from the more perfect degree of vision which ensues from its success.

The advantages I have mentioned, especially the complete exemption from any secondary accidents, have entitled this operation to be regarded,

by the most distinguished surgeon oculists of Europe, as the method, *par excellence*, in the cases to which it is appropriate.

The cases to which it is peculiarly applicable are those of semi-hard cataract (which is one of the forms most commonly met with), as this variety sometimes rapidly increases in bulk after re-clination, and in this swollen state is liable, by its pressure, to provoke serious, if not destructive inflammation of the internal tissues. It is especially desirable to employ this method in operating upon persons of advanced age, as, in such, the lens is not readily removed by absorption. Very hard cataracts are dissolved with difficulty at any period of life, and as they are apt, if merely displaced, to cause lesion or compression of the retina, the operation of extraction may be regarded as indicated. The same indication exists in cases where there is any tendency to amaurosis or to cerebral congestion, as the retina may then be injuriously affected by the slightest pressure from the displaced lens.

On the other hand, it is equally important to avoid attempting extraction under unfavorable circumstances ; as when the eye is too small or too deeply sunken in the orbit to allow room for making a proper section of the cornea—when the pupil is contracted, or adherent to the capsule—or when we have evidence that softening has taken place in the vitreous humor.

Oscillation of the globe was formerly considered as contra-indicating this mode of operating, but we have now the means of controlling this unsteadiness by anaesthetic agents.

I do not know whether any other person has employed these auxiliaries in operations upon the eye. When in Europe, soon after the discovery of these adjuvants in surgical practice, the most distinguished authorities expressed to me their opinion that they should not be made use of in ophthalmic surgery, and I have never heard of their being thus applied by any other operator. My own experience, however, has proved, that we may safely avail ourselves, occasionally, of their aid, and thus obtain the opportunity to execute our manœuvres with more ease, and therefore with greater certainty.

Since my first resort to them, more than two years since, I have several times employed ether or chloroform in operations for cataract, and have thus secured complete success in cases of unusual difficulty.

A second reason for the prejudice which has prevailed against the extraction of cataract, is to be found in the formidable descriptions which have been given of the accidents that may follow this operation, and of the uncertainty attending it.

But these unfavorable statements of consequences and results have been mostly based upon operations in which the section of the cornea has been made at its inferior margin.

The section of the upper half is attended with a little more difficulty than that along its lower edge, but it offers very important advantages. The risk of prolapsus iridis, or of evacuation of the vitreous humor, either at the moment of the operation, or subsequently, is in a great measure avoided ; and the flap of the cornea being covered by the upper eyelid,

and the two edges of the wound thus kept in exact apposition, every opportunity is afforded for immediate union.

If, on the contrary, the incision is made downwards, there is danger that the adhesion of the wound may be prevented by the secretions with which it is bathed in the lower palpebral sinus—by the constant trickling of the humors from the interior of the eye—or by a prolapse of the iris; or that the edge of the lower lid may insinuate itself beneath the flap, and, by evertting it, cause the discharge of the entire contents of the globe.

It is not to be denied that the operation by extraction is slightly more difficult than those executed with the needle; but this will not justify us in consigning to oblivion one of the highest glories of surgical achievement.

The actual dangers attending its performance are not greater than those incident to other methods, and, its manœuvres once skilfully terminated, the patient is placed under conditions of far greater security against future accident.

For all these reasons, this operation, without assuming any title to exclusive adaptation, deserves to be regarded as often the most advantageous, and sometimes the only mode on which we can rely; and claims, not only a place, but a high position, among the means by which our profession relieves “the ills that flesh is heir to.”

The results of my own experience have confirmed the high opinion of the value of this method which I had derived from observation of the practice of the most distinguished European operators, in whose hands I was satisfied that in a very large number of cases a success was obtained much greater than would have followed operations with the needle upon the same subjects.

10 Essex st., Boston, June 6, 1851.

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#### WATERING PLACES.

[Communicated for the Boston Medical and Surgical Journal.]

SOME fifteen years since, a family consisting of six or seven adult persons removed from Newport, R. I., to Hartford, Ct. Although in their wonted health when they came, they perceived, one and all, within a few months, that, on ascending staircases, or running, or making exertions, they were decidedly more vigorous than in Newport. I state this from memory; but there can be no doubt that the family acquired and retained more health and energy by the removal.

It will not be understood, of course, that such is the infallible effect of this measure. But one such occurrence in so large a family, and coming, too, from so famous a watering place as Newport, offers a fair opportunity for calling the attention of the readers of this Journal to the comparative effects of different localities upon the human constitution.

Suppose, then, we compare Newport and Saratoga Springs—the two summer resorts for invalids in America. A bath of sea-water is well known to be followed by a clammy, cold, disagreeable state of the skin.

How many there are who have to resort to their wash bowls with soap and water to remove the saline moisture and restore the hands to a comfortable condition ; and this, whether the sea-water be warmed artificially or not. A *mineral* bath of Saratoga, at blood heat (100°), retains carbonic acid gas, not only sufficient to keep every grain of the numerous carbonates in complete solution, but, moreover, enough greatly to stimulate the skin after immersion in a bath. None but resident physicians here can appreciate the warm commendations these baths receive for leaving the whole cutaneous surface in a warm, glowing condition, and feeling like silk on contact.

Let us consider the comparative effects of the two baths. However much the medical mind has been befogged by the word "bracing," and how much soever nonsense is constantly talked and printed about this same thing, none can doubt, that the prolonged chilliness and clammy moisture of the skin are sedative. I do not remember the author or the man who does not admit prolonged, continuous cold to be sedative. How different the state of the circulation and powers of the system, during the practice of frequent sea-baths, and the warming, life-propelling baths of Saratoga ! In saying this, I do not pronounce the last-mentioned baths to be intrinsically preferable. Not at all. Everything is *relative* in medicine. I think there were two or three seasons in Saratoga, say ten years since, when more than half the invalids manifested a sthenic diathesis, requiring the careful administration of counter-agents during the invigorating effect of these tonic remedies. Such persons, during the prevalence of such diathesis, will find that the damp sea air, the slight nutrition of a fish diet, the monotony of a sea coast, and, above all, the chilly sea-baths, are the very remedies they need. The depression of pulse and powers, the reduction of inflammatory heat, the moist tongue and restored secretions, rapidly restore the sensations and functions of health, and hence the invalid is "braced." The very swell of the sea is associated in his mind with health, and he insists upon it that the sea air is bracing.

But it happens that this business of sea-bathing is not only not always bracing, but is attended with alarming effects. Dr. Smith, of Staten Island, told me he presumed a number of infants were rescued every summer from death, by detecting the cause of the children's rapid decline, and alarming their mistaken mothers. He said the rapidity with which they recovered and improved after the reducing effects of cool sea-baths were discontinued, was most instructive. Indeed, for several years past, especially since the appearance of Vermont erysipelas, the general complexion of invalids seems to demand an entonic treatment, which requires scarcely any counter-acting agents, such as salts, antimonials, calomel, and vegetable diet ; but very many cases have been put, at once, upon the Pavilion Spring as an alterative and tonic, and will bear, in addition to this, our strongest chalybeate, and most potent tonic, porter, beefsteaks, mutton, and other articles of a nutritious and stimulating character, and gain quite as rapidly and be as much braced as the first mentioned invalid. These are constantly recurring results. The upland air—bracing air, if you please—of Saratoga, the inimitable and attrac-

tive nature of the tonic laxative and alterative medicines, from the powerful cathartic of old Congress to the highly alterative character of the newly-discovered EMPIRE SPRING ; the various scenes and amusements, both within and without the village ; the great variety of board, from twelve dollars the week down to three and even to two and a half, and all trying to tempt the public to their tables, affording, in every case, a fair supply of animal food ; the mineral baths, accessible to all, being only twenty-five cents each, or five for a dollar ; and the generally absorbing interest which arises from the many thousands of visitors compressed into a village which, though doubled in population within a dozen years, yet brings them into close proximity—all these and other considerations combine in this dry, pure atmosphere, to *brace* the depressed and tone up the impoverished system.

The reader will have perceived that in my opinion physicians should send those patients of theirs whose diathesis is entonic, who are benefited by an occasional bleeding, by calomel, salts, abstinence, Graham diet, &c., to the sea-side, where inaction, innutritious diet, damp air (which everybody knows more thoroughly conducts away animal heat than dry), sailing, and, above all, sea-bathing in the surf, may exert a concurrent influence in restoring health. That in other cases, on the contrary, where, for instance, a long-continued derangement of the bile and other secretions has existed ; or, where, from varied causes, the system is acting feebly, *particularly if indicated by a slow, weak, compressible pulse*, let the patient be directed to the instrumentality, for at least six weeks, of these waters and baths ; and the physician will seldom repent of his professional direction.

It would be pleasant to draw out my reasons more in detail ; but, really, I would like to make a short article. The writer *has been compelled*, during the past thirteen seasons, to take responsibility in diseases of this nature. What confirms my own confidence in the above opinion is, that many have consulted me after spending a few weeks on the sea-coast—some better and some worse—in whose cases I have in almost every instance, after examining the pulse and leading facts, exactly anticipated the effect of the visit to the coast. The same criterion I use when advising many from Vermont and New Hampshire, whose *underacting* systems are depressed and enfeebled (not braced) by the prolonged cold of winter, who generally fall sick in March. To such it is my invariable practice to recommend permanent residence in a warm climate, and fully to abandon a residence so much at war with the laws of their organism.

The same criterion is strictly applicable and of surpassing importance to many professional men, clergymen and others, who have settled in vast numbers in and about New York and its bay, as well as in other maritime cities. Minister's throat ail is truly an atonic disease ; and although men recover by the sea-side, it is in defiance of the general tendency of circumstances.

On being interrogated about the adaptedness of hydropathy to a given case, the same criterion is available and will be found of great use.

But I must conclude. To carry out particulars and adduce proofs, would require a book.

I close with one suggestion to my brethren abroad. Do not direct your scrofulous patients to go to the Iodine Spring. It is a feeble water, and the name was given to the spring only *ad captandum vulgus*. The new Empire Spring is working charnally for scrofula. Do the profession know there are twelve grains of hydriodate of potash in a gallon of water—double any other spring? There being only a mere trace of iron in the water, I send my tuberculous patients to that spring unhesitatingly, hitherto with most satisfactory results. M. L. NORTH.

Saratoga Springs, June 5, 1851.

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#### ELEPHANTIASIS OF THE SCROTUM—SURGICAL OPERATION.

[THE remarkable surgical operation detailed below (*oschéoplastique*) was performed in Athens (Greece) by John Olympius, M.D., Professor of Surgery in the University of Otho, at Athens, and was communicated by the Rev. John H. Hill, Missionary of the Protestant Episcopal Church, residing in Athens. It reflects the highest honor on the rising chirurgical character of the nation, so renowned in the history of the world for great men in the arts and in literature. The drawings were carefully prepared by the operator, and, with the report, were kindly furnished to the editor of this Journal on his late visit to Athens.—ED.]

Stamatos Sapontsis, 30 years old, a countryman residing in Caristo (island of Eubcea), about seven years previous to the operation in question suffered from an ulcer in the scrotum, which occasioned him uneasiness when he walked. As well as he can remember, he dates the commencement of the *elephantiasis* or *hypertrophy* both of the *scrotum* and of the skin of the *penis*, from the appearance of this ulcer. After making use of many simple remedies, such as he found at hand, without avail, and finding the malady rapidly increasing, he was recommended by a medical man to seek admittance into the Civil Hospital of the Capital, where, on the 23d of July, 1850 (seven years after the first appearance of the disease), he underwent the operation of having all the affected parts, both of the *scrotum* and the *penis*, removed, according to the method of Gartan Bey (vide *Pruner*, "Krankheiten im Orient," pages 331, 332; Erlangen, 1847.)

The following are the details of this operation.

First. For the purpose of covering anew the skin of the *penis*, which in consequence of the disease had to be entirely dissected off (*apopsisosis*), a portion of the skin of the *ephebium* (*mons veneris*), of an oblong form (five fingers' breadth long, and four broad), was incised, as seen at 1, Plate A.

Secondly. The incisions (2, 2) were made, in order to form out of these portions (*lambeaux*) the new scrotum. These incisions, commencing above and in front, and extending in the rear towards the *perineum*, united near the *anus*, and embraced within them the whole of the metamorphosed scrotum.

PLATE A.

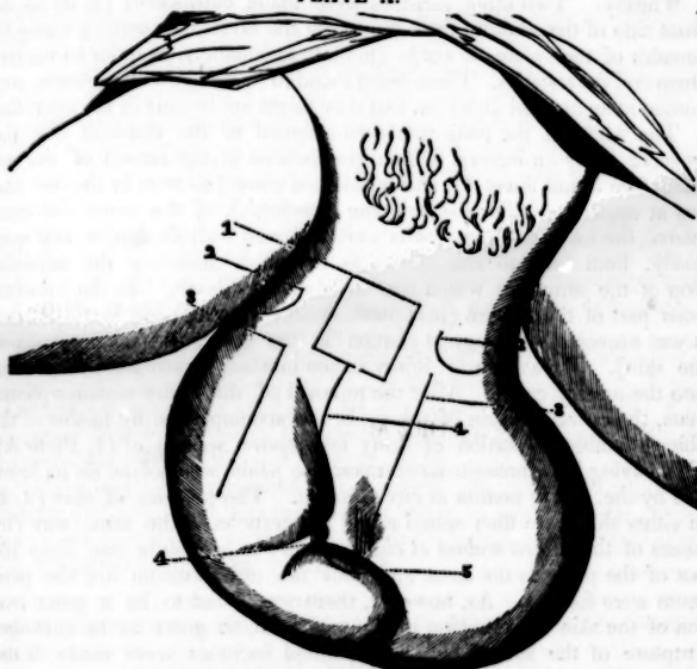
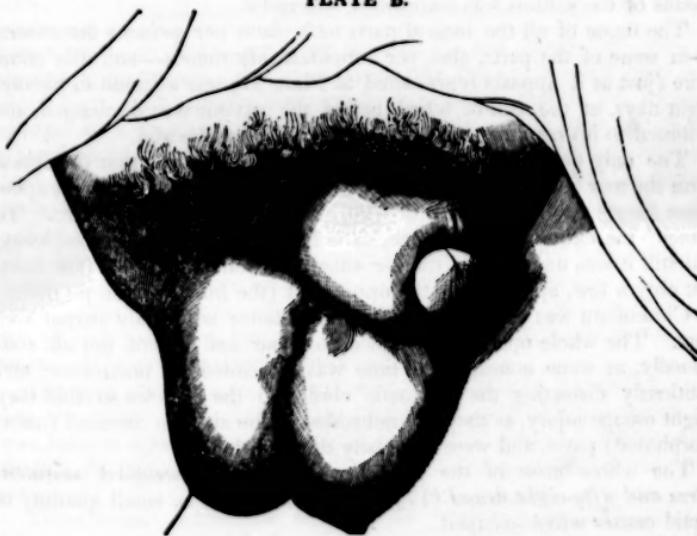


PLATE B.



Thirdly. Two other incisions were made *downwards* (3, 3) on the front side of the scrotum from the top to the bottom, extending along the breadth of the spermatic cords (funicul. spermatic.), in order to uncover them and the testicles. These being found to be uninjured by disease, were turned in an upward direction, that they might not be hurt in the operation.

The whole of the penis was then stripped of the diseased skin that covered it, by an incision which commenced at the mouth of the prepuce (see 5 and lower 4), and terminated above, as seen in the line ending at upper 4. After the stripping (apodersis) of the penis was completed, the metamorphosed parts were removed without danger, and quite easily, from front to rear, as far as the anus, including the adjoining skin of the perineum which was affected by disease. As the membranous part of the urethra (pars membranacea urethrae) lies in this region, it was necessary to use great caution in the apodersis (the stripping off the skin). To avoid any injury to the urethra, a catheter was inserted into the urinary canal. After the removal of the entire metamorphosed mass, the covering again of the penis was accomplished by means of the oblong lambeau (portion of skin) first above spoken of (1, Plate A). This having been brought down upon the penis, was joined on its lower side by the *sutura nodosa et circumvoluta*. The portions of skin (2, 2) on either side were then united round the testicles in the same way (by means of the *sutura nodosa et circumvoluta*) in a middle line from the root of the penis to the anus, and thus the new scrotum and the perineum were formed. As, however, there was found to be a great tension of the skin in the region of the perineum, so great as to endanger a rupture of the suture, two long parallel incisions were made in the skin on either side of the perineum, about a finger's breadth distant from the sutures, when the tension ceased, and the union of the parts by means of the sutures was completely successful.

The union of all the incised parts took place per *primam intentionem*—in some of the parts, also, per *secundem intentionem*—and the entire cure (just as it appears represented in Plate B) was effected in twenty-eight days, at the end of which period the patient was discharged, and returned to his country in perfect health and very cheerful.

The only disagreeable occurrence in the operation was that the skin to form the new covering of the penis was obliged to be taken from the ephelium (mons veneris), where the skin is always thick and hairy. To remedy the former inconvenience, some layers of fat were scraped away, but still it was unavoidably thicker than was convenient. A few hairs, but only a few, appeared on the upper part (the front) of the penis.

Chloroform was exhibited, but in this instance with only partial success. The whole operation occupied one hour and a half, but not continually, as some considerable time was expended in uncovering and cautiously dissecting the spermatic cord and the testicles so that they might escape injury, as they lay imbedded in the swollen diseased (metamorphosed) parts, and were not easily distinguished.

The whole mass of the hypertrophy removed, weighed *seventeen litres and fifty-eight drams* (17½ lbs.), exclusive of a small quantity of liquid matter which escaped.

*Athens, January 28, 1851.*

The following notice of the preceding remarkable case is extracted from the *Courrier d'Athènes*, No. 191, 28 July, 1850.

“Une des plus belles opérations dont la médecine de notre temps peut se vanter, a été pratiquée ce jours ci dans notre hôpital civil par un de nos plus habiles chirurgiens, M. le docteur Olympios, professeur de l'Université, advantageusement connu déjà au monde scientifique par maintes autres opérations difficiles, couronnées ordinairement d'un succès prompt et complet.

“Le malade dont il s'agit était un laboureur de l'île d'Eubée, qui atteint depuis sept ans d'une elephantiasis du scrotum, malade assés rare en Grèce, se voyait, quoique jeune encore, condamné à une existence des plus tristes, la tumeur, par son énorme poids et volume lui permettant à peine de faire quelques pas avec difficulté.

“La mal lui était devenu doublement pénible, parce que l'altération et l'hypertrophie du scrotum avaient en même temps envahi les teguments adjacents, ce qui gênait infiniment les évacuations urinaires. Par cette opération oschéoplastique, le malade a été délivré d'une tumeur qui a été trouvée d'un poids de dix-sept livres et demie.

“En citant cette opération qui, inventée par l'immortel chirurgien français Delpech, a été très rarement exécutée en Europe, nous ne saurions assés faire l'éloge de M. le professeur Olympios, et féliciter l'Université d'Athènes à laquelle il appartient.”

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#### CONGENITAL VARIOLA IN TWINS.

BY JAMES AYER, M.D., BOSTON.

[Communicated for the *Boston Medical and Surgical Journal*.]

I WAS called, in haste, last week, to Mrs. P., and found her lying on the bed, in great pain. On examination, the head of a small fetus was found born. The uterine contractions were active, and its full delivery effected in a moment, attended by a feeble cry. The pains continued, a bag of fluid was felt protruding, and soon a second fetus was expelled dead. Two separate placentæ were afterwards removed, and the patient made comfortable.

The infants were found of the size and development of six months. The living one had a dozen or more of pustules, on the face, head and breast; one or two were noticed on the abdomen, but none on the limbs. Three or four were good-sized, plump and well-defined pustules of smallpox. The remainder were not so full, but evidently of the same character. This one survived its birth two hours.

The dead child had no offensive odor; the abdomen was dark purple, and the cuticle quite loose. Its whole body, especially the abdomen, was marked with depressions, similar to those of variola in infants, after death. No elevations or pustules were noticed; these marks only remained.

Three weeks before the abortion, the mother, I was informed, had broken out with varioloid, after the usual premonitory symptoms, and had

just recovered when I saw her. The disease was so mild that a physician was not called. She could not trace her miscarriage to any over-exertion, or any cause, except the attack of varioloid. Whether the mother infected the two at the same period, and the death of one caused the expulsion of both; or one had the disease first, and the second received it from him, are questions of some interest, but difficult, from the evidence, to decide.

June 12, 1851.

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#### SAMUEL GEORGE MORTON, M.D.

It is with the greatest regret that we record the death of Samuel G. Morton, M.D., which took place in this city, on the 15th of May last. Although in feeble health for many years past, and evidently holding life by a very slight tenure, Dr. Morton was in the discharge of his ordinary professional duties up to the period of his last illness, which was of only four days' duration. His final attack was of an apoplectic nature; but he had long labored under considerable disease of the lungs and heart, as will be seen from the autopsy, appended to our notice, for the details of which we are indebted to Dr. Neill.

The death of Dr. Morton deprives our profession of one of its most distinguished members, and abruptly terminates a scientific career, which had become one of the brightest illustrations of our country. His reputation as a naturalist was diffused throughout the world, and we believe that no cotemporaneous American name was better known abroad than his. His loss, in every respect to be lamented, will be particularly felt in the department of natural history, in which he was prosecuting the most interesting researches, when thus prematurely cut off, at the age of 52, in the prime of mental vigor and usefulness. In the relations of private life, no one ever conciliated more universal esteem and affection than Dr. Morton. He passed through the world literally without an enemy, beloved and respected in all circles, everywhere deservedly regarded as one of the most amiable and irreproachable of men.

Dr. Morton was a native of Philadelphia, but, we learn, passed a portion of his youth in New York. He pursued his medical studies in the University of Pennsylvania, and in the office of the late Dr. Parrish. After graduating in the University of Pennsylvania, he spent several years in Europe, and received a second degree from the University of Edinburgh.

Returning to his native city, Dr. Morton rapidly passed into extensive practice, and, up to the time of his death, enjoyed a popularity second to none among the practitioners of Philadelphia. To the literature of his profession he made numerous valuable contributions. In 1835 he edited Mackintosh's *Practice of Physic*, which went through three subsequent editions; in 1833 he published an excellent original work on *Consumption*; and in 1849 an elaborate work on *Anatomy*.

Dr. Morton was for many years engaged as a teacher of medicine, and always ranked among our best lecturers. He gave several clinical

courses in the Philadelphia Almshouse Hospital, and was Professor of Anatomy in the original organization of the Pennsylvania Medical College.

With this assiduous and unfaltering devotion to strictly professional avocations, Dr. Morton combined an enthusiastic and earnest pursuit of natural history, which earned for him an European reputation, and gave many splendid results to science. His first scientific publication was a work on the *Fossils of the Cretaceous Group*, in which, we believe, he described every example that has been found in North America.

As far back as twenty years ago, he commenced collecting the materials, which he eventually embodied in the *Crania Americana*, the first work of the kind ever produced. This great work, published in 1839, immediately placed the author in the foremost rank among the cultivators of natural science, and was received throughout the world as a most valuable original contribution to ethnology. Its full importance is yet to be appreciated. At present it stands almost isolated; and its real value can be developed only when other races of men are studied and tabulated on a similar plan, and a comparison of the averages afforded, enables us to determine the characteristic differences between the various races.

Dr. Morton spent many years upon the *Crania Americana*, and so careful was he to produce it free from inaccuracy, that, after the elaborate tables had been nearly completed—upon Mr. George Combe's pointing out a slight error in the starting point from which the measurements had been made—a new series was at once commenced, and carried through on the corrected method.

The *Crania Egyptiaca* followed the *Americana*. The presence of the integuments, however, and the bituminized condition of the crania, prevented any definite series of measurements.

The subject of hybridity occupied much of Dr. Morton's attention in the latter period of his life. At the time of his death he was pursuing his inquiries in several interesting and hitherto unexplored channels, connected with this important branch of natural history; and he had already collected a vast number of facts, and reached the solution of many obscure and previously unnoticed points. In this course of investigation he was led into a close examination of the specific characters of the wolves of North America, and the results of the crosses between the different species of wolves and the imported dogs—a thread of inquiry which we know was developing most valuable conclusions in the highest walks of natural science.

In the midst of these absorbing scientific and professional labors, Dr. Morton found time to indulge a taste for poetry; and his occasional effusions show that he united a fine imagination, and refined appreciation of the beautiful, with his more solid powers and attainments. And all these noble intellectual qualities were graced with the crowning attractions of a most unaffected bearing, the gentlest manners, and a genuine cordiality and kindness of disposition!

At the time of his death, Dr. Morton was president of the Academy of Natural Sciences, of which he had been a leading member for thirty years. He was also a fellow of the College of Physicians, of the Ameri-

can Philosophical Society, and of numerous other learned societies, at home and abroad. The various associations with which he was connected in Philadelphia, united in every possible tribute of respect to his memory.

*Post-mortem Examination.*—On the day previous to his death, Dr. Morton was considered convalescent from an indisposition which his physicians had not supposed to be dangerous or alarming.

About the middle of the same day, a tendency to stupor was noticed, which gradually increased, and terminated in paralysis and death.

Present—Drs. Rodman, Beesley, Wistar, Pepper, McClellan and Neill.

*Head.*—The symptoms immediately preceding death, directed attention particularly to the condition of the brain, it being supposed that effusion had taken place in that organ. The arachnoid had lost its transparency, and no fluid was found in its cavity, but there was considerable serous effusion in the sub-arachnoid cellular tissue.

The pia mater was very much congested, particularly on the left side, and from its vessels blood had been extravasated in several places. The basilar and vertebral arteries contained venous blood. Two small clots were found very nearly in similar positions upon the superior surface of each hemisphere; the anterior clot was the larger upon either side, and rested upon the upper surface of the anterior lobe. It consisted of about one drachm of blood, and had assumed the form of the sulci, into which it had insinuated itself. The brain itself was large and symmetrical. Its substance was firm and natural in every respect. The choroid plexus was equally congested with the pia mater. Very little fluid was found in the ventricles.

*Thorax.*—The pericardium contained the usual amount of serum, and presented no appearance of disease.

The heart was large and flabby, and its tissue was pallid and somewhat softened. The cavities generally were dilated; the parietes of those of the right side were particularly thin, and contained some fibrinous clots. The ostium venosum of the right side was enlarged to such a degree that it could not have been closed by the tricuspid valve. The mitral valve was much thickened by soft fibrinous yellow deposit.

The arch of the aorta was dilated, and had some small patches of atheromatous matter deposited upon its internal surface.

The left lung was entirely useless for the purposes of respiration. It was contracted to a very great degree, and occupied but a small space in the upper portion of the thorax, where it was firmly bound down by the adhesion of the costal and pulmonary pleura, by which the cavity of the pleura was entirely destroyed. The congestion of the lung was so great that it appeared dark colored and solidified, although it contained sufficient air to make it float in water.

The right lung, which was unusually large, was congested and adherent to the walls of the thorax by adventitious bands of an old formation. The cavity of the pleura contained about a half pint of bloody fluid, probably the result of post-mortem changes.

These adhesions of the left pleura, and the contraction of the left

lung, were produced by an inflammatory affection of these organs, which occurred a few years since.

*Abdomen.*—The spleen was enlarged and very much congested. The tissue was so soft and pulpy that it readily yielded to pressure by the finger.

The liver was natural. The alimentary canal was not examined.

It can readily be understood from the above facts, that the immediate cause of Dr. Morton's death was *meningeal apoplexy*, resulting from that disturbance of the circulation which was manifested by the engorgement of the bloodvessels of the brain and lungs, but which was produced by dilatation of the heart.—*Philadelphia Medical Examiner.*

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#### CASE OF A MAN BITTEN BY A MAD DOG.

BY L. W. TRASK, M.D., OF HIRAM, OHIO.

MR. W. E. was bitten on the right hand, some two and a half years since, by his own dog. This excited considerable surprise, as the creature had been uniformly playful and affectionate. Some members of the family, however, had noticed that the dog had not appeared quite as well as usual for a few days.

The next morning, contrary to his usual habits, he was missing. In the course of the day, it was ascertained that he had been busily travelling during the night, and had bitten some four or five other dogs. He had, by this time, gone several miles from home, and exhibited such plain symptoms of *hydrophobia*, that he had been killed. As there was considerable alarm in the country about mad dogs, every one that he had bitten was either killed or tied up.

Ten days after he had been bitten, Mr. W. E. presented himself to me for treatment. I carefully considered every circumstance connected with the case, and came to the conclusion, that in all probability he had actually been bitten by a *rabid animal*.

Upon careful examination, there appeared to be, in all, five wounds inflicted by the dog's teeth; one on the back of the hand, another on the palm, and three on the fingers.

I excised, as thoroughly as possible, the parts in and around each wound, encouraged bleeding by warm applications, and applied cupping glasses wherever it was practicable. In this way I obtained quite a quantity of blood. Next, I cleansed the wounds carefully with tepid water, and put into them a strong solution of nit. argent. I then filled them with lint to prevent adhesion, and applied stimulating plasters, directed my patient to take a cathartic of salts and senna, and to keep quiet. He got along very comfortably—wounds discharged freely, and were kept open, by the constant use of lint, about a month.

But my fears for him were very much increased, when I heard that the dogs that had been secured, had shown symptoms of hydrophobia, and had been killed. However, after six weeks had elapsed, and my patient continued comfortable, I began to entertain hopes of him, which proved to be well founded; for he has experienced no bad effects whatever from the bites to this time.

It will readily be understood, that the foregoing treatment is not original with me; yet the fortunate result of this case has given me considerable confidence in it. The object aimed at, as every one will see, is to remove the poison from the wound before it shall be absorbed into the general system. We may be encouraged, I think, to practise excision after the lapse of weeks, if no bad symptoms have come on; because the poison of rabid animals, unlike that of the rattlesnake, is absorbed very slowly. But the sooner the operation is performed, the better.

In conclusion, I would remark, that excision and the application of the cupping-glass will be found equally successful in bites of poisonous snakes, if practised sufficiently early. But in this case, it must be attended to immediately.—*Ohio Medical and Surgical Journal.*

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## THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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BOSTON, JUNE 18, 1851.

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### EDITORIAL CORRESPONDENCE.

*Greece (continued).*—The territory of modern Greece is of about the dimensions of Massachusetts—with a population of not far from one million, and an annual revenue of four millions of dollars. It is oppressed with a royal family, consisting of a king and queen, without children. His majesty is hated, if people speak truly, while her majesty is rather popular. For the last eight months the king has been in Bavaria, and his loving subjects express a hope that he will never return. His salary is only \$160,000 per annum! A standing army is kept up, of between 8,000 and 9,000 men, which is of no earthly use, for if the Turks were to attempt a blow, they could eat up every soldier in the Greek service in one night. The kingdom depends for its security on the European powers exclusively. If, therefore, the army were disbanded, and the soldiers employed in agriculture, the wealth of the nation would increase more rapidly. Athens looks like a flourishing town, and will by and by become a very handsome one. When the Rev. Mr. Hill, an American missionary, first took up his residence in Greece, 24 years ago, not an edifice of modern growth had been erected. Coaches are driving through the streets actively, and if there were good roads to the country, there would be safe intercourse with the interior—but now there is not. Political corruption is dominant, and the government carries all elections and every measure by the over-awing influence of soldiers in the back ground, a place in office, or a position for a dangerous individual where he can scrape the pot, as the proverb says, since there is no dish so clean that it does not yield a taste of what was in it. An English gentleman, who has resided fifteen years in Athens, speaks particularly of the low reputation of the courts of law. The judges of some of the tribunals have a salary equal to \$35 a month, and are removable at the pleasure of the king. The insecurity of their office is probably one cause of the corruption that has the ascendancy. Athens is governed by a corporation of a mayor, municipal council, &c., elected by the citizens. A more complicated kind of system never could have existed, since they elect electors, whose choice must be approved by his majesty, or it is of no effect. Three mayors are annually elected, at the same

time, whose names are carried up to the throne, and if Otho, or in his absence the queen, likes the list, one of them is approved, and is qualified. If not, then there is an opportunity to go into a new election for three more.

Athens at times is a sickly city, and will continue to be so till the drainage is better managed. For miles round, the land is low and inclined to be marshy. On entering the plateau from the Piraeus, I was struck with its general resemblance to that of Eedraclon, and Celo-Syria. Their geological features are precisely alike. In 1850 the mortality of Athens was 1384, while the births were only 534, in a population of 26,000. In the early part of the present year, typhus fever has been quite prevalent, and many deaths occurred. Still, with these facts before the king—for no one does or thinks here without his slow, cold, Bavarian consent—nothing is done to better the public health by filling bogs, and draining off the water from marshy places.—A more picturesque national costume cannot be conceived than the modern Grecian. A red cap, jauntily worn, swayed to one side by a heavy silk tassel; a jacket of all colors, covered with embroidery—the sleeves open to the shoulder; a kilt, or white cotton petticoat, reaching to the knees—often containing ten yards; red, white, and other colored stockings, with a different colored wide garter outside; red shoes, and a silk scarf wound several times tightly round the body, make up the essentials of a court or gentleman's dress. In consequence of swathing the abdomen so tightly as is the custom of the country, more people are said to be ruptured in Greece than in any other part of the world.—A stranger is struck with the universal buzz of honey bees about Athens. Very little of the excellent land is under cultivation—and consequently weeds, and especially those which yield something for the bees, are prevalent, and hence their multiplication. Mount Hymettus, east of the Acropolis, was celebrated in ancient times for its excellent honey. An excursion to the quarries on Mt. Pentelicus, where the marble for all the past and present buildings of Athens and its environs was procured, shows the astonishing industry of the people in past ages. The plain of Marathon, the plain and region about Sunium; the bay of Salamis, Elusis, and the theatre of the Elusinian mysteries, are each and all of them points of intense interest in the history of civilization and classical literature. I visited the palace thoroughly, and although an unmeaning and ungraceful excrescence of marble, brick and mortar, it has some splendid state apartments within. It is too low studded, and the defect runs through the whole interior. The throne-room is very beautiful, without being overdone. On my way up the avenue, I saw the queen step on the hand of her groom, who raised her in a twinkling to the saddle of a spirited horse, and away cantered her little majesty, followed by a retinue of laced coats and other appendages of the household.

Of the progress of education in Greece, the school system, the public morals, amusements, &c., it is not my intention to write much upon them at present. I am making diligent inquiries, and through the kindness of the Rev. Mr. Hill, and other gentlemen of intelligence and reliability, shall no doubt gather up some valuable information, illustrative of the true condition of modern Greece. Amusing anecdotes are related of the king. His leading ambition seems to be, to be thought an universal genius and profoundly wise in every thing; yet so despotic and self-willed is he, that no one must act or think without his special royal permission. The administration of the government, in its various departments, has suffered through the king's delays, and want of decision. About a year since, an

officer of some distinction, stationed on the island of Negropont, being reduced very low in health, petitioned his superior for leave of absence. The latter could do nothing till it was laid before his majesty. When the request came up, instead of answering promptly one way or the other, he laid by the paper for consideration. After a long while his mind was made up, and he graciously granted the poor sick officer's request; but unfortunately, when word reached the island, the petitioner had been dead three months! At one time a basket of charcoal could not be purchased for government use, till the order had been submitted to his all-wise examination. The physicians of Athens, some time since, concluded to publish a pharmacopeia of their own, which was prepared by a committee, the chairman of which was the present professor of chemistry in the University. It being a law, however, that no work shall go to press till the manuscript is submitted to the government, the sheets, scrawled off and abounding in apothecary signs and measures, were necessarily handed to the bureau, without the least expectation of their being detained an hour. To the confusion of the committee, however, Otho took it into his head that he must hear it all read, it was so important. The professor was sent for, and the king, with pencil in hand, indicated his views, as the former waded through an ocean of sentences unintelligible to the muddy brain of this German blockhead. Six entire weeks were consumed before the inspection was completed—the silly fool having listened for hours in succession to words and ideas which he could not comprehend.

Near the base of the Acropolis, is the philanthropic mission school established by the Rev. Mr. Hill and his lady, which is exerting a good influence on the moral and intellectual condition of the native inhabitants. The little children are taught English, while they are instructed in every useful branch of knowledge in the Greek language. Their system is admirable; and from the happy results already realized, the effects, that the diffusion of the first principles in morals, Christianity, and science, is to exert on the future destiny of this resuscitated country, are incalculable. The building is located nearly in the centre of the ancient Agora, or market. In digging for a foundation they came to the original marble floor of that building, and the steps by which one now ascends to the front door of the mission school are those identical stones, and were perhaps trodden upon by St. Paul, on his way to the Areopagus near by. Marble columns were also found, standing in their original position, which had been covered for ages by the accumulated rubbish of two or three cities, built one upon the other. For a quarter of a mile N. W. and N. E. of the Acropolis, quite up to its perpendicular sides, the earth has been filled in to the depth of twenty feet. No matter where an excavation is made, marble, wrought into some form of beauty, is sure to come up. Mr. Hill actually found the public oil measures; and I examined one of the omars, or public measures for wheat. He presented me with an immense marble sarcophagus, with bull's heads, ram's heads, and a bold, heavy chain-work on the sides in relief, which must have been superb in its day. The length is about seven feet, by three wide and three high, weighing a ton and a half, if not more. It refers to a remote antiquity, and may have contained the body of Euripides, Pisistratus, or Aristides the Just. In passing on the back of the palace garden, the other day, the workmen were opening a trench, in which some elegantly wrought blocks belonging to immensely large fluted columns, were exposed, where they may have been covered, for aught any one knows to the contrary, twenty-five centuries.

*Cod Liver Oil.*—As has been often remarked, and as every one well knows, there is much of the substance purporting to be pure cod liver oil, which is offered for sale, that is not genuine. Within the last two years, we have been called upon to examine many samples of what purported to be *cod liver oil*, some of which did not furnish evidence of coming from cods' livers, but were *rich in lard, in seal, whale and other oils*. Adulteration, and substitution of other oils for that of the genuine cod liver, has been practised to a greater extent than is imagined. Many of our respectable druggists and apothecaries, in consequence, have been obliged to manufacture their oil from the fresh livers. But even then, they may be imposed upon, by the substitution of other livers for those of the cod, which has been known to have been done in several instances. To obviate all these difficulties, Mr. Burnett, the well-known apothecary in Tremont Row, in this city, informs us that he has a vessel constantly in commission at Newfoundland or Labrador, with a crew who are engaged in the cod fisheries, in order to prepare the oil especially for him. An experienced person is on board, who manufactures the oil from the livers of the fish soon after they are taken out. Barrels of the oil thus obtained are sent to Mr. Burnett, as opportunity may present, the vessel remaining for several months on the fishing grounds. We have seen a sample of it that was really beautiful looking, presenting all the evidence of purity. To those who use this therapeutic agent, it is of the greatest importance to have an article that may be relied on, and we take much pleasure in recommending such as has been exhibited to us by Mr. Burnett.

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*Hospital for Inebriates.*—A hospital for the custody and treatment of inebriates, is very much needed in this State. There can be no doubt that if one was established, and properly appointed, much good would result from it. It is well known that there are many persons, who possess such a hankering for alcoholic drinks, that it is almost impossible for them to resist the temptation to indulgence when such drinks can be procured. Now it is to these individuals that a retired hospital would be of essential service; for such appetite is a *disease*, or it produces one, and often requires medical as well as moral treatment for its cure. Our insane asylums have many such cases, and the greatest benefits have been derived by the temporary confinement and other treatment which such patients are there subjected to; yet it is not the proper place for them, after all. If some of our medical friends would undertake to establish a private hospital of the kind referred to, we have no doubt they would be fully remunerated for the outlay in a very short time.

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*Dr. Bird on Urinary Deposits.*—Messrs. Blanchard & Lea, of Philadelphia, have just issued a second edition of Dr. Golding Bird's excellent treatise on urinary deposits. Dr. Bird's researches have been very extensive in this department of pathology, and we consider his last work unequalled, and can, with the greatest confidence, recommend it to the profession, as one well calculated to assist them in their investigation of morbid urine, or the diagnosis, pathology and treatment of urinary deposits generally. Ticknor & Co. have it for sale.

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*The newly discovered Deodorizer.*—Mention was made, in a previous number of the Journal, of a newly discovered substance, possessing the

property of rendering fetid matter inodorous. At that time, sufficient opportunity had not been afforded to test fully its merits, and we were unwilling to commit ourselves until perfectly satisfied that it would accomplish all that it was represented to do. Since then, we have given it a fair trial upon matter which was most offensive to the olfactories, and must say that the result was both satisfactory and astonishing. Any putrid decomposed animal or vegetable matter, placed in contact with this new agent, was, in a very short time, rendered perfectly inodorous. We take much pleasure in testifying to its merits, and trust it will prove as satisfactory in experiments by others as it has in the few by ourselves. To Dr. J. D. Buzzell, one of the directors of the company who prepare it, we are indebted for much useful and interesting matter relative to its discovery and manufacture, some of which we shall at an early day lay before our readers. It would be well if the Boards of Health of large towns and cities should examine, for themselves, this new agent, and give the report of their investigation to the public. There cannot be too much done for the preservation of the health and lives of our citizens, and those who by their researches promote the one, and prolong the other, may be considered benefactors of the race, and richly merit a reward for their labors. This deodorizer is manufactured by the Great Pond Mining Company, Cape Elizabeth, near Portland, Maine, and is offered at a very low price, in order to induce the public to make trial of its remarkable properties.

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*Gutta Percha Water Pipes and Speaking Tubes.*—We have been shown a very fine specimen of gutta percha tubing, which came from the establishment of Mr. Charles Stodder, of this city. It is said that this article is not acted on by the strongest acids or alkalies, and therefore may be considered almost indestructible. In consequence of its resisting the action of such substances, it has been applied to many uses in the arts, agriculture, and manufactures, and especially for tubing for the conveyance of water or other liquids used for culinary purposes. It is a very good substitute for lead pipe, and to those who have any fears that lead pipe exerts injurious influence on water that passes through it, it will be very acceptable, inasmuch as it will fully answer their purpose.

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*Disgusting Remedies.*—If our homœopathic friends are in the habit of using in their practice such disgusting and absurd remedies as are recommended in Jahr's *Pharmacopœia*, the sooner a line of distinction is drawn between them and the regular practitioners, the better. We know not whether any of Hahnemann's disciples have demonstrated, on scientific principles, the action or properties of such remedies. They certainly bring to mind the absurd ingredients used in the old treacle of Andromichus. The following, from the London "Institute" of Jan. 5th, 1851, will present the matter to our readers.

"Jahr's *Nouvelle Pharmacopœie Homœopathique*, published at Paris in 1841, contains, in the list of *materia medica*, various disgusting absurdities, among which are *lachesis*, the poison of the rattlesnake; *formica rufa*, the red ant; *aradea diadema*, a species of spider; *rana bufo*, the toad; *lacerta agilis*, the lizard; *scarabæus melolontha*, the cockchafer; *riterra putorius*, stinking polecat, of which the officinal part is the fetid secretion from the glands near the anus. The *écrivisses*, or fresh-water crabs, are directed to be pounded alive in a mortar until reduced to a fine paste. This is diluted

with about twice its volume of alcohol, then strained, and the liquor preserved for dilution in the usual way. Toads, lizards, cockchafer, and other reptiles and insects, are brayed (alive) in the same manner!

"We also learn from a contemporary that to such an extent is the doctrine *similia similibus curantur* carried, that 'syphiline' is administered to patients suffering under secondary syphilis; and 'blennorrhin,' which is gonorrhœal matter manipulated according to the rules of homeopathic confectionery, is mentioned in the Homeopathic Archives (published at Leipsic, 1841) as a remedy for gonorrhœa and gleet!"

*On the Employment of Impermeable Varnishes in Visceral Inflammations.*—M. Robert Latour stated, that it was some months since he had submitted to the Academy his treatment of inflammatory disease by covering the surface with impermeable varnish. Since that period, M. Latour has treated cases of ovaritis, and of peritonitis, with a success beyond that attending any other plan. A case of peritonitis was related in which the whole abdomen having been covered with a coating of collodion, the symptoms rapidly subsided.—*Acad. Med. Paris—London Med. Gaz.*

*Medical Miscellany.*—A Dr. McConnell, it is said, has applied for a patent for the manufacture of gas from pine wood.—Dr. Barrett, of Middletown, Ct., communicates to the public the fact that a perfectly defined kangaroo has been discovered in the Portland free stone quarry. The animal was about four feet long. The broadest part of the figure behind is 9½ inches.—Some considerable number of cases of smallpox are in this city and neighboring towns. We learn that it is also quite prevalent in Maine.—The daughter of Dr. A. I. Cummings, of Roxbury, four years old, was most inhumanly killed, last week, by a man who had applied to the doctor for professional advice and assistance. It is supposed the man labored under some aberration of mind, as there was no cause that could be assigned for the deed, and he almost immediately killed himself.—The cholera at Paducah, Ky., is on the increase and quite fatal in its attacks. Dr. Newton Lane, formerly of Louisville, has died of the disease.—The one hundredth anniversary of the founding of the Pennsylvania Hospital was commemorated recently by an address from Dr. George B. Wood. The idea of this institution originated with Dr. Thomas Bond in 1750.

*Suffolk District Medical Society*—Subject for discussion at the meeting, on the last Wednesday in June, "The Treatment of the Convulsions of Children."

*To Correspondents.*—Dr. Ayer's case of Apoplexy of the Lungs, and Dr. Parsons's case of Aneurism, have been received.

*MARRIED.*—At New York, Samuel A. Fisk, M.D., of Northampton, Mass., to Harriet B., daughter of the late Jacob Bininger, of N. Y.—At Philadelphia, 5th inst., Thomas J. Griffiths, M.D., Louisville, Ky., to Agnes E., second daughter of Wm. F. Murphy, of Philadelphia.

*Deaths in Boston*—For the week ending Saturday noon, June 14, 61.—Males, 38—females, 23. Accidental, 1—disease of bowels, 1—disease of bowels, 1—consumption, 6—convulsions, 4—cancer, 1—canker, 1—cyanosis, 1—dysentery, 1—drowned, 1—dropsey, 2—dropsey of the brain, 2—diabetes, 1—erysipelas, 2—exhaustion, 1—typhus fever, 3—lung fever, 2—brain fever, 1—intermittent, 1—infantile, 7—disease of the liver, 2—disease of the lungs, 3—marasmus, 5—measles, 2—old age, 1—pleurisy, 1—smallpox, 5—ulcer, 1—worms, 1.

Under 5 years, 22—between 5 and 20 years, 12—between 20 and 40 years, 11—between 40 and 60 years, 11—over 60 years, 5. Americans, 25; foreigners and children of foreigners, 36.

The above includes 10 deaths at the City Institutions.

*The Norfolk District Medical Society.*—The Norfolk District Medical Society held its annual meeting at Dedham, on the 14th of May, for the choice of officers, &c.

The following officers were unanimously elected:—Dr. Jeremy Stimson, of Dedham, *President*. Dr. Appleton Howe, Weymouth, *Vice President*. Dr. Edward Jarvis, Dorchester, *Secretary*. Dr. Danforth P. Wight, Dedham, *Treasurer*. Dr. Lemuel Dickerman, Medfield, *Librarian*. Drs. Ebenezer Stone, Walpole; Henry Bartlett, Roxbury, *Committee of Supervision*. Drs. Ebenezer Alden, Randolph; Ebenezer Stone, Walpole; Henry Bartlett, Roxbury, *Censors*. Drs. Henry Bartlett, Roxbury; Ebenezer Stone, Walpole; Ebenezer Woodward, Quincy; Jonathan Ware, Milton; Simeon Tucker, Stoughton; Danforth P. Wight, Dedham; Benjamin Mann, Foxborough; Edward Jarvis, Dorchester, *Councillors*.

The Society voted that the Censors meet at Roxbury on the Tuesday next preceding the first Wednesday of October, at 11 o'clock, A. M. Dr. Jarvis read his address “On the Causes of Insanity,” which the Society voted to print for the use of the members.

Dr. Ebenezer Alden was appointed to deliver the address at the annual meeting in May, 1852. The Society voted to have a free and general discussion upon the autumnal diseases, at the next meeting, on the 2d Wednesday of November, 1851.

The meeting was very full, and the members of the Society seemed to be glad of this opportunity of coming together, and after a public dinner they adjourned to meet again in November.

*Complete Intestinal Obstruction.* By Mr. JOSIAH CLARKSON, of Birmingham.—The impediment arose from disease of the sigmoid flexure of the colon and the rectum, and the descending colon was opened in the loin successfully. The patient was a robust young girl, aged 21. After the usual medical treatment had failed, twelve days having elapsed without any evacuation from the bowels, Amussat's operation was performed in the usual manner. Mr. Clarkson gives the following practical directions for ascertaining the spot where the bowel is to be found:

“Two fingers' breadth above the crest of the ilium, and midway between the anterior and posterior superior spinous processes of the same bone, is the spot beneath which the intestine will generally be found. This mode of finding the exact situation was first pointed out to me by Mr. Hodgson, at the time of the operation; and since then I have frequently proved its accuracy on the dead subject.”

The patient recovered, with an artificial anus, the only annoyance being the tendency of the orifice to contract and block up the passage, as usually happens in these cases. This, in spite of all the means that could be used, eventually caused her death, nearly fourteen months after the operation. On *post-mortem* examination, the obstruction, which existed about six inches from the lower termination of the rectum, and on a level with the fundus of the uterus, was found to be caused by a dense cartilaginous substance which surrounded the intestine in this spot, and completely obliterated its canal.—*Dublin Medical Journal*.

*Medical Department of Iowa University.*—The legislature of Iowa has formally incorporated the College of Physicians and Surgeons as part and parcel of the University; and what is more worthy of note, has made the diploma of said college a licence to practice in the State.